

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

HAWAII REPUBLICAN PARTY

ADDRESS (number and street)

725 Kapiolani Blvd., #C-105

Check if different  
than previously  
reported. (ACC)

HONOLULU

HI

96813

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00085506

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2007

through

02

28

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Katherine Thomason

Signature of Treasurer

Electronically Filed by Katherine Thomason

Date

09

26

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
HAWAII REPUBLICAN PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2007</span>		100716.64
(b) Cash on Hand at Beginning of Reporting Period .....	152237.23	
(c) Total Receipts (from Line 19) .....	112436.87	195078.67
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	264674.10	295795.31
7. Total Disbursements (from Line 31) .....	103899.04	135020.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	160775.06	160775.06
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

HAWAII REPUBLICAN PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	81435.00	141885.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	24979.50	42127.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	106414.50	184012.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	106414.50	184012.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	655.89	680.89
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	12.46	22.59
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	5354.02	10362.69
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	5354.02	10362.69
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	112436.87	195078.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	107082.85	184715.98

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2344.62	4108.29
(ii) Non-Federal Share.....	6029.03	10564.21
(b) Other Federal Operating Expenditures.....	95525.39	120347.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	103899.04	135020.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	103899.04	135020.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	97870.01	124456.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	106414.50	184012.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	106414.50	184012.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	97870.01	124456.04
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	655.89	680.89
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	97214.12	123775.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Boyd Akase		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 7
Mailing Address 45-062 Waikalua Rd		<b>Transaction ID:</b> SA11A1.55483
City Kaneohe	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer State of Hawaii	Occupation Attorney	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Boyd Akase		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 7
Mailing Address 45-062 Waikalua Rd		<b>Transaction ID:</b> SA11A1.55857
City Kaneohe	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer State of Hawaii	Occupation Attorney	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1085.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Andres Albano		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 748 Kokomo Pl		<b>Transaction ID:</b> SA11A1.55578
City Honolulu	State HI	Zip Code 96825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CD Richard	Occupation Real Estate Consultant	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1585.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Violeta Arnobit Mailing Address 789 Puuikena Dr City Honolulu State HI Zip Code 96821 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55546 Amount of Each Receipt this Period 500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Violeta Arnobit Mailing Address 789 Puuikena Dr City Honolulu State HI Zip Code 96821 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55602 Amount of Each Receipt this Period 150.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Violeta Arnobit Mailing Address 789 Puuikena Dr City Honolulu State HI Zip Code 96821 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 835.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55603 Amount of Each Receipt this Period 185.00 Contribution
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		835.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Anne Atkinson

Mailing Address 91-119 Aipoola Pl

City State Zip Code  
 Ewa Beach HI 96706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self employed

Occupation  
writer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55604

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Jane Au

Mailing Address 869 Moaniala St

City State Zip Code  
 Honolulu HI 96821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55819

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jane Au

Mailing Address 869 Moaniala St

City State Zip Code  
 Honolulu HI 96821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55820

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Baker Mailing Address 206 Lumahai Pl City Honolulu State HI Zip Code 96825 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer East-West Center Occupation Researcher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55379 Amount of Each Receipt this Period 200.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Ernest Balatincz Mailing Address 86-026 Hoaha St City Waianae State HI Zip Code 96792 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Balatincz & Associates Occupation safety consultants Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55738 Amount of Each Receipt this Period 100.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Nancy Bannick Mailing Address 2943 Kalakaua Ave 408 City Honolulu State HI Zip Code 96815 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Free-Lance Writer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55380 Amount of Each Receipt this Period 200.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)

Emily Baptiste

Mailing Address 7911 Makaaaoa PI

City State Zip Code  
Honolulu HI 96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HMAA

Occupation  
Owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.55529

Amount of Each Receipt this Period

100.00

Contribution

B. Full Name (Last, First, Middle Initial)

Emily Baptiste

Mailing Address 7911 Makaaaoa PI

City State Zip Code  
Honolulu HI 96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HMAA

Occupation  
Owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.55852

Amount of Each Receipt this Period

200.00

Contribution

C. Full Name (Last, First, Middle Initial)

Emily Baptiste

Mailing Address 7911 Makaaaoa PI

City State Zip Code  
Honolulu HI 96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HMAA

Occupation  
Owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.55858

Amount of Each Receipt this Period

600.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) David Barrett Mailing Address 4152 Koko Dr City Honolulu State HI Zip Code 96816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 545.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55606 Amount of Each Receipt this Period 545.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Bill Benton Mailing Address 4255 Buckskin Lake Dr City Ellicott City State MD Zip Code 21042 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Benton & Associates Occupation Consultant Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55821 Amount of Each Receipt this Period 35.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) John Bucksbaum Mailing Address 1864 N Burling St City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer General Growth Properties, Inc. Occupation CEO Real Estate Investment Trust Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55424 Amount of Each Receipt this Period 5000.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

5580.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Julia Cabral Mailing Address 1406 Gregory St City Honolulu State HI Zip Code 96817 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation entertainer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55825 Amount of Each Receipt this Period 40.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Chan Mailing Address PO Box 160946 City Honolulu State HI Zip Code 96816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Han Development LLC Occupation Director Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55558 Amount of Each Receipt this Period 400.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Queenie Chee Mailing Address 833 Waika PI City Honolulu State HI Zip Code 96825 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1045.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55746 Amount of Each Receipt this Period 45.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

485.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Franco Coluccio		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 91-141 Kaiaeloa Blvd		<b>Transaction ID:</b> SA11A1.55616
City Kapolei	State HI	Zip Code 96707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 290.00
Name of Employer Coluccio Construction	Occupation Contractor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
		Contribution

<b>B.</b> Full Name (Last, First, Middle Initial) Patricia Cross		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 87-905 Kulauku St		<b>Transaction ID:</b> SA11A1.55619
City Waianae	State HI	Zip Code 96792
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
		Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Deborah Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 2355 Ala Wai Blvd, 504		<b>Transaction ID:</b> SA11A1.55621
City Honolulu	State HI	Zip Code 96815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1040.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kimberly Delmore Mailing Address 1629 Waikalulu Ln, B313 City Honolulu State HI Zip Code 96817 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55624 Amount of Each Receipt this Period 300.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Ferdinand Dimaya Mailing Address 98-617 Kuini St City Aiea State HI Zip Code 96701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55626 Amount of Each Receipt this Period 225.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Everett Dowling Mailing Address 2005 Main St City Wailuku State HI Zip Code 96793 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dowling Company, Inc Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55388 Amount of Each Receipt this Period 10000.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A.** Vera Estes

Mailing Address 1434 Punahou St, 711

City State Zip Code  
Honolulu HI 96822

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55826

Amount of Each Receipt this Period

30.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** Alexander Fadrowsky

Mailing Address 1360 Laukahi St

City State Zip Code  
Honolulu HI 96821

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gentry Properties

Occupation  
Vice-President

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55630

Amount of Each Receipt this Period

400.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** John Henry Felix

Mailing Address PO BOX 240778

City State Zip Code  
Honolulu HI 96824

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Eagle Corp

Occupation  
CEO

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.55555

Amount of Each Receipt this Period

2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2930.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ryan Fernandez Mailing Address 881 Uakanikoo St City State Zip Code Wahiawa HI 96786 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N & K CPA's Occupation auditor Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55634 Amount of Each Receipt this Period 140.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Lynn Finnegan Mailing Address 99-195 Ohekani Lp City State Zip Code Aiea HI 96701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Legislature Occupation Representative Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55556 Amount of Each Receipt this Period 1000.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Marvin Fong Mailing Address 2919 Kapiolani Blvd City State Zip Code Honolulu HI 96826 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Market City, Ltd Occupation Property Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55637 Amount of Each Receipt this Period 350.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1490.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Edna Fujiwara Mailing Address 1561 Kanunu St 1405 City Honolulu State HI Zip Code 96814 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation teacher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55502 Amount of Each Receipt this Period 50.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Alexander Gaston Mailing Address 98-1079 Kaohohi St City Aiea State HI Zip Code 96701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Investments Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55756 Amount of Each Receipt this Period 135.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Glaza Mailing Address 46-087 Ipuka St City Kaneohe State HI Zip Code 96744 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1025.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55644 Amount of Each Receipt this Period 1025.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1210.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Glaza Mailing Address 46-087 Ipuka St City Kaneohe State HI Zip Code 96744 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer US Postal Service Occupation mail handler Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55642 Amount of Each Receipt this Period 80.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Shirley Hasenyager Mailing Address 235 Kuuhua Pl City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Artist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55647 Amount of Each Receipt this Period 85.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Jayne Henley-Davis Mailing Address 319 Kaelepulu Dr, C City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 545.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55831 Amount of Each Receipt this Period 245.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

410.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Craig Holbrook		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 3663 Woodlawn Dr		<b>Transaction ID:</b> SA11A1.55585
City Honolulu	State HI	Zip Code 96822
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Global Medical & Dental		Occupation CEO/Owner
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Contribution

<b>B.</b> Full Name (Last, First, Middle Initial) Gavin Hubbard		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 4 / 2 0 0 7
Mailing Address 818 Moowaa St		<b>Transaction ID:</b> SA11A1.55559
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Okada Trucking		Occupation Executive
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Gary Ishikawa		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7
Mailing Address 4169 Koko Dr		<b>Transaction ID:</b> SA11A1.55535
City Honolulu	State HI	Zip Code 96816
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer DOD		Occupation Dept Adj General
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Shelton Jim On Mailing Address 733 Bishop St, Ste 2675 City Honolulu State HI Zip Code 96813 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Jim On & Beerman Occupation Attorney Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55652 Amount of Each Receipt this Period 1500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Judith Jordan Mailing Address 46-031 Kumoo PI City Kaneohe State HI Zip Code 96744 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Volunteer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55654 Amount of Each Receipt this Period 50.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Kurt Kawafuchi Mailing Address 1413 Middle St City Honolulu State HI Zip Code 96819 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of Hawaii Dept of Taxation Occupation Director Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55860 Amount of Each Receipt this Period 125.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1675.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)

Quentin Kawanakoa

Mailing Address 971 Mokulua Dr

City

Kailua

State

HI

Zip Code

96734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.55586

Amount of Each Receipt this Period

200.00

Contribution

B. Full Name (Last, First, Middle Initial)

Quentin Kawanakoa

Mailing Address 971 Mokulua Dr

City

Kailua

State

HI

Zip Code

96734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55835

Amount of Each Receipt this Period

50.00

Contribution

C. Full Name (Last, First, Middle Initial)

Edithe-Eve Kearney

Mailing Address 1694 Palamoi St

City

Pearl City

State

HI

Zip Code

96782

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Club Alley Cat

Occupation  
manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.55587

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)  
 Edythe-Eve Kearney  
 Mailing Address 1694 Palamoi St

City State Zip Code  
 Pearl City HI 96782

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Club Alley Cat

Occupation  
 manager

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.55760

Amount of Each Receipt this Period

50.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
 Helen Kekuna  
 Mailing Address 95-211 Kaolea Pl

City State Zip Code  
 Mililani HI 96789

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.55761

Amount of Each Receipt this Period

25.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
 Adrienne King  
 Mailing Address 1163 Kaeleku St

City State Zip Code  
 Honolulu HI 96825

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 King & King

Occupation  
 Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.55481

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Nadine Kometani-Oura Mailing Address 92-1348 Uahani St City Kapolei State HI Zip Code 96707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55589 Amount of Each Receipt this Period 1000.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Koziol Mailing Address 2998 Makalei Pl City Honolulu State HI Zip Code 96815 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Lend Lease Communities Occupation Non-Executive Director Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55398 Amount of Each Receipt this Period 5000.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Ellen Lakey Mailing Address 430 Keoniana St, 1014 City Honolulu State HI Zip Code 96815 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55661 Amount of Each Receipt this Period 525.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

6525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Leslie Lam Mailing Address 47-135 Kaimalolo Pl City Kaneohe State HI Zip Code 96744 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Heart Association Occupation Director Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55402 Amount of Each Receipt this Period 300.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Al Landon Mailing Address 4621 Aukai Ave City Honolulu State HI Zip Code 96816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Bank of Hawaii Occupation President/CFO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55666 Amount of Each Receipt this Period 350.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Sheila Leas Mailing Address 2141 Mohala Way City Honolulu State HI Zip Code 96822 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55667 Amount of Each Receipt this Period 250.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)

June Lee

Mailing Address PO Box 88232

City State Zip Code  
Honolulu HI 96830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harbor Wing Technologies,  
Inc.

Occupation  
Director

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Transaction ID: SA11A1.55486

Amount of Each Receipt this Period

400.00

Contribution

**B.** Full Name (Last, First, Middle Initial)

Robert Lee

Mailing Address 98-1775 Halekea St

City State Zip Code  
Aiea HI 96701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hawaii National Guard

Occupation  
The Adjutant General

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.55482

Amount of Each Receipt this Period

500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)

Robert Lee

Mailing Address 98-1775 Halekea St

City State Zip Code  
Aiea HI 96701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hawaii National Guard

Occupation  
The Adjutant General

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55668

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

935.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Dorvin Leis		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 1640 Halama St		<b>Transaction ID:</b> SA11A1.55770
City Kihei	State HI	Zip Code 96753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Dorvin D. Leis Co, Inc.	Occupation Corporate Officer	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2535.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dorvin Leis		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 7
Mailing Address 1640 Halama St		<b>Transaction ID:</b> SA11A1.55861
City Kihei	State HI	Zip Code 96753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Dorvin D. Leis Co, Inc.	Occupation Corporate Officer	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2655.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Jada London		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 1309 McCully St		<b>Transaction ID:</b> SA11A1.55671
City Honolulu	State HI	Zip Code 96826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00
Name of Employer Retired	Occupation Retired	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

**SUBTOTAL** of Receipts This Page (optional) .....

370.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)

William McCorriston

Mailing Address 1925 Mckinley St

City State Zip Code  
Honolulu HI 96822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McCorriston et al

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.55592

Amount of Each Receipt this Period

2500.00

Contribution

B. Full Name (Last, First, Middle Initial)

Ronald McNichols

Mailing Address 1280 Puualoha St

City State Zip Code  
Kailua HI 96734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jostens

Occupation  
sales

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.55593

Amount of Each Receipt this Period

100.00

Contribution

C. Full Name (Last, First, Middle Initial)

Terry Metcalf

Mailing Address 7433 Makaa St

City State Zip Code  
Honolulu HI 96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Builder

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55674

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

7600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Antya Miller Mailing Address 59-661 Alapio Rd City State Zip Code Haleiwa HI 96712 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NS Chamber of Commerce Occupation Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55537 Amount of Each Receipt this Period 700.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Antya Miller Mailing Address 59-661 Alapio Rd City State Zip Code Haleiwa HI 96712 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NS Chamber of Commerce Occupation Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55551 Amount of Each Receipt this Period 300.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Kyong Moses Mailing Address 92-339 Akaula St City State Zip Code Kapolei HI 96707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55410 Amount of Each Receipt this Period 1000.00 Contribution
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A.** Jason Nagai

Mailing Address 95-1515 Ainamakua Dr, 42

City State Zip Code  
 Mililani HI 96789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55680

Amount of Each Receipt this Period

245.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** Stephanie Napoli

Mailing Address PO Box 89324

City State Zip Code  
 Honolulu HI 96832

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55682

Amount of Each Receipt this Period

375.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** George Nardin

Mailing Address 1115 Koohoo Pl

City State Zip Code  
 Kailua HI 96734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.55552

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1620.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Dwight Otani Mailing Address 584 Pamaele St City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer D Otani Produce Inc Occupation Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55568 Amount of Each Receipt this Period 1500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Dwight Otani Mailing Address 584 Pamaele St City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer D Otani Produce Inc Occupation Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55841 Amount of Each Receipt this Period 500.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Otani Mailing Address 1429 Akamai St A City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55779 Amount of Each Receipt this Period 370.00 Contribution
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			2370.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Matthew Otani Mailing Address 1429 Akamai St A City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 870.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55780 Amount of Each Receipt this Period 500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Nelson Oyadomari Mailing Address 1568 Ala Napunani St City Honolulu State HI Zip Code 96818 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Primary Residential Mtg Occupation Mortgage Banker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55689 Amount of Each Receipt this Period 1000.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Kuuahaku Park Mailing Address 965 Maunawili Cir City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Horizon Lines Inc Occupation Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55784 Amount of Each Receipt this Period 100.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Janice Pinkston

Mailing Address 20 Tamalpais Ave

City State Zip Code  
 Belvedere CA 94920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55693

Amount of Each Receipt this Period

400.00

Contribution

Full Name (Last, First, Middle Initial)

B. Robert Piper

Mailing Address 2152 Booth Rd

City State Zip Code  
 Honolulu HI 96813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Hawaii Lt Gov

Occupation  
Deputy Director B & F

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.55538

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

C. C Dudley Pratt

Mailing Address 276 N Kalaheo Ave

City State Zip Code  
 Kailua HI 96734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Campbell Estate Trustee/retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.55786

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

650.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A.** John Radcliffe

Mailing Address 1010 Wilder Ave, 703

City State Zip Code  
Honolulu HI 96814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UHPA

Occupation  
Executive Director

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.55557

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** Randy Rarick

Mailing Address 59-063 Hoalua St, A

City State Zip Code  
Haleiwa HI 96712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self employed

Occupation  
Bus owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55698

Amount of Each Receipt this Period

210.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** Lawrence Rodriguez

Mailing Address 1001 Bishop St 2400 Pauahi

City State Zip Code  
Honolulu HI 96813

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
CPA

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.55519

Amount of Each Receipt this Period

2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

3710.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence Rodriguez			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 1001 Bishop St 2400 Pauahi			<b>Transaction ID:</b> SA11A1.55699	
City State Zip Code Honolulu HI 96813			Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			Contribution	
Name of Employer Self Employed		Occupation CPA		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2700.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Rostron			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7	
Mailing Address 4738 Aukai Ave			<b>Transaction ID:</b> SA11A1.55541	
City State Zip Code Honolulu HI 96816			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			Contribution	
Name of Employer Retired		Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Gregory Ruhland			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 7	
Mailing Address 28 Makakai PI			<b>Transaction ID:</b> SA11A1.55862	
City State Zip Code Hilo HI 96720			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			Contribution	
Name of Employer HIPC		Occupation Physician		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) David Serrone Mailing Address 67-451 Alahaka St City State Zip Code Waialua HI 96791 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Salem Media Sales Mngr Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55703 Amount of Each Receipt this Period 180.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Shintani Mailing Address 1527 Onipaa St City State Zip Code Honolulu HI 96819 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Alan Shintani Inc General Contractor Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55595 Amount of Each Receipt this Period 500.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Steiner Mailing Address 334 Awini Pl City State Zip Code Honolulu HI 96825 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation McCorriston Miller Mukai Atty Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55709 Amount of Each Receipt this Period 1200.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1880.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Street		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 5344 Papai St		<b>Transaction ID:</b> SA11A1.55713
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 130.00
Name of Employer US Filter	Occupation Civil Engineer	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Anne Sutton		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 3539 Kahawalu Dr		<b>Transaction ID:</b> SA11A1.55714
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 180.00
Name of Employer Retired	Occupation retired	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1180.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Anne Sutton		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7
Mailing Address 3539 Kahawalu Dr		<b>Transaction ID:</b> SA11A1.55804
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer Retired	Occupation retired	Contribution
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1215.00	

**SUBTOTAL** of Receipts This Page (optional) .....

345.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A.** Anne Sutton

Mailing Address 3539 Kahawalu Dr

City State Zip Code  
Honolulu HI 96817

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55847

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** Max Sword

Mailing Address 2375 Kuhio Ave

City State Zip Code  
Honolulu HI 96815

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Outrigger Enterprises

Occupation  
VP Industry Affairs

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.50

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55717

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** Carol Thomas

Mailing Address 1189 Akamai St

City State Zip Code  
Kailua HI 96734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
HECO

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55848

Amount of Each Receipt this Period

180.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

530.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Gordon Trimble Mailing Address 1350 Ala Moana 812 City Honolulu State HI Zip Code 96814 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Legislature Occupation Senator Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55489 Amount of Each Receipt this Period 500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Gordon Trimble Mailing Address 1350 Ala Moana 812 City Honolulu State HI Zip Code 96814 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Legislature Occupation Senator Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55856 Amount of Each Receipt this Period 35.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Lawrence Tseu Mailing Address 1441 Kapiolani Blvd Suite 708 City Honolulu State HI Zip Code 96814 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Dentist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.55543 Amount of Each Receipt this Period 10000.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10535.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Sheryl Vuillemot

Mailing Address 3460 Kaohinani Dr

City

Honolulu

State

HI

Zip Code

96817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mac.comOccupation  
Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55719

Amount of Each Receipt this Period

245.00

Contribution

Full Name (Last, First, Middle Initial)

B. Donna Walden

Mailing Address 3939 Oold Pali Rd

City

Honolulu

State

HI

Zip Code

96817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55721

Amount of Each Receipt this Period

700.00

Contribution

Full Name (Last, First, Middle Initial)

C. Maria Weber

Mailing Address 216 Wahioli Way

City

Lahaina

State

HI

Zip Code

96761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.55523

Amount of Each Receipt this Period

350.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

1295.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)

David Yahiro

Mailing Address 2551 10th Ave

City State Zip Code  
Honolulu HI 96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.55732

Amount of Each Receipt this Period

600.00

Contribution

B. Full Name (Last, First, Middle Initial)

Fred Yamashiro

Mailing Address PO Box 657

City State Zip Code  
Kamuela HI 96743

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menehune Development Comp-  
any

Occupation  
Developer

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55849

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)

Lloyd Yonenaka

Mailing Address PO Box 2333

City State Zip Code  
Honolulu HI 96804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Hawaii

Occupation  
Administrator

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.55816

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

1130.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A.**

Full Name (Last, First, Middle Initial)

Mark Zen

Mailing Address PO Box 62104

City

Honolulu

State

HI

Zip Code

96839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.55851

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

81435.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 58

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)  
Katherine Thomason

Mailing Address 44-166 Nanamoana St

City State Zip Code  
Kaneohe HI 96744

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
IMS

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.89

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA15.55910

Amount of Each Receipt this Period

655.89

Reimbursed for picture fr-  
aming

**SUBTOTAL** of Receipts This Page (optional) .....

655.89

**TOTAL** This Period (last page this line number only) .....

655.89

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Sandra Albano		<b>Transaction ID:</b> SB21B.55881 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 0 7</div> </div>
Mailing Address 748 Kokomo Pl		<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
City Honolulu State HI Zip Code 96825	<div>Category/Type</div>	
Purpose of Disbursement PROFESSIONAL FEES: DINNER		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) AMERICAN EXPRESS		<b>Transaction ID:</b> SB21B.55890 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 0 7</div> </div>
Mailing Address BOX 0001		<b>Amount of Each Disbursement this Period</b> <div>358.39</div>
City LOS ANGELES State CA Zip Code 90096	<div>Category/Type</div>	
Purpose of Disbursement COSTCO		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) ART KALAHIKI		<b>Transaction ID:</b> SB21B.55875 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 6 / 2 0 0 7</div> </div>
Mailing Address 1323 HIGH VIEW PLACE		<b>Amount of Each Disbursement this Period</b> <div>890.12</div>
City HONOLULU State HI Zip Code 96816	<div>Category/Type</div>	
Purpose of Disbursement ENTERTAINMENT: DINNER		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**6248.51**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

## **A. CARDINAL COMMUNICATION STRATEG**

Mailing Address 925 UNIVERSITY AVE #A

City SACRAMENTO State CA Zip Code 95825

Purpose of Disbursement  
AUTOMATED PHONE MESSAGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55891

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1728.28

Full Name (Last, First, Middle Initial)

## **B. CHASE CARD SERVICES**

Mailing Address CARDMEMBER SERVICE  
PO BOX 94014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55897

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4838.46

Full Name (Last, First, Middle Initial)

## **C. INTERCALL**

Mailing Address PO BOX 281866

City ATLANTA State GA Zip Code 30384

Purpose of Disbursement  
Conference calls

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55897.6

Date of Disbursement

/   /

Amount of Each Disbursement this Period

271.89

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

6566.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

## **A. American Airlines**

Mailing Address Honolulu Airport

City Honolulu State HI Zip Code 96819

Purpose of Disbursement

Air fare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.7

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

443.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. American Airlines**

Mailing Address Honolulu Airport

City Honolulu State HI Zip Code 96819

Purpose of Disbursement

Air Fare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.9

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1159.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. POSTMASTER**

Mailing Address DOWNTOWN STATION  
335 MERCHANT STREET

City Honolulu State HI Zip Code 96813

Purpose of Disbursement

Stamps

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.14

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

## **A. OCEANIC CABLE**

Mailing Address P.O. BOX 30050

City HONOLULU State HI Zip Code 96820

Purpose of Disbursement

Cable service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.18

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

109.86

[MEMO ITEM]

## **B. Hyatt Hotel - Washington D.C.**

Mailing Address 1000 H St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Hotel - RNC Winter meeting

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.21

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

669.84

[MEMO ITEM]

## **C. Hyatt Hotel - Washington D.C.**

Mailing Address 1000 H St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Hotel - RNC Winter meeting

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.22

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

709.18

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Hyatt Hotel - Washington D.C.		<b>Transaction ID:</b> SB21B.55897.24 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 7</div> </div>
Mailing Address 1000 H St NW		Amount of Each Disbursement this Period <div>30.40</div>
City Washington State DC Zip Code 20001		
Purpose of Disbursement meal		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) Hyatt Hotel - Washington D.C.		<b>Transaction ID:</b> SB21B.55897.26 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 7</div> </div>
Mailing Address 1000 H St NW		Amount of Each Disbursement this Period <div>22.55</div>
City Washington State DC Zip Code 20001		
Purpose of Disbursement Meal - travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
<b>C.</b> Full Name (Last, First, Middle Initial) INTERCALL		<b>Transaction ID:</b> SB21B.55897.28 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 7</div> </div>
Mailing Address PO BOX 281866		Amount of Each Disbursement this Period <div>91.90</div>
City ATLANTA State GA Zip Code 30384		
Purpose of Disbursement Conference call service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A. CINDY'S LEI & FLOWER SHOPPE**

Mailing Address 1034 MAUNAKEA STREET

City HONOLULU State HI Zip Code 96817

Purpose of Disbursement

Leis for funeral

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55897.29

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

157.07

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CINDY'S LEI & FLOWER SHOPPE**

Mailing Address 1034 MAUNAKEA STREET

City HONOLULU State HI Zip Code 96817

Purpose of Disbursement

LEIS: LDD07

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55892

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

243.98

Full Name (Last, First, Middle Initial)

**C. CINGULAR WIRELESS**

Mailing Address PO BOX 30178

City LOS ANGELES State CA Zip Code 90030

Purpose of Disbursement

TELEPHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.55893

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

190.26

**SUBTOTAL** of Disbursements This Page (optional) .....

434.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

## **A. DESIGN STUDIO**

Mailing Address 333 WARD AVE C-1

City HONOLULU State HI Zip Code 96814

Purpose of Disbursement  
PICTURE FRAMING: DINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55870

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

809.78

Full Name (Last, First, Middle Initial)

## **B. E NOA CORPORATION**

Mailing Address PIER 31 791 N NIMITZ HWY

City HONOLULU State HI Zip Code 96817

Purpose of Disbursement  
TROLLEY RENTAL: JULY 4 PARADE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55883

Date of Disbursement

02 / 19 / 2007

Amount of Each Disbursement this Period

428.01

Full Name (Last, First, Middle Initial)

## **C. FRANCO TYP-POSTALIA INC**

Mailing Address PO BOX 4272

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55868

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1487.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)  
HAWAII BALLOON CO.

Mailing Address P.O. BOX 245044

City HONOLULU State HI Zip Code 96824

Purpose of Disbursement  
DECORATIONS: DINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55894

Date of Disbursement

/   /

Amount of Each Disbursement this Period

240.84

B. Full Name (Last, First, Middle Initial)  
HEARTLAND PAYMENT SYSTEM

Mailing Address 1437 YOUNGSTOWN CENTER HWY 62

City JEFFERSONVILLE State IN Zip Code 47130

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55865

Date of Disbursement

/   /

Amount of Each Disbursement this Period

931.87

C. Full Name (Last, First, Middle Initial)  
HILTON HAWAIIAN VILLAGE

Mailing Address 2005 KALIA RD.

City Honolulu State HI Zip Code 96815

Purpose of Disbursement  
BALLROOM RENTAL - DINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55867

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66743.60

SUBTOTAL of Disbursements This Page (optional) .....

67916.31

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

<b>A. ROSINA HO</b> Full Name (Last, First, Middle Initial) Mailing Address 46-696 KALANIANA'OLE HWY City WAIMANALO State HI Zip Code 96795 Purpose of Disbursement FLOWER ARRANGEMENTS:DINNER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.55879</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 3348.63
<b>B. LEXIS NEXIS</b> Full Name (Last, First, Middle Initial) Mailing Address PO BOX 894166 City LOS ANGELES State CA Zip Code 90189 Purpose of Disbursement RESEARCH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.55885</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 7 Amount of Each Disbursement this Period 209.00
<b>C. MERIDIAN CENTRAL PUBLIC AFFAIR</b> Full Name (Last, First, Middle Initial) Mailing Address 2937 S 120TH ST City OMAHA State NE Zip Code 68144 Purpose of Disbursement PROFESSIONAL FEES: MEMBERSHIP DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.55895</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 500.00
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<b>4057.63</b>
<b>TOTAL This Period (last page this line number only)</b> .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Keith Nakano		<b>Transaction ID:</b> SB21B.55878 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 0 7</div> </div>	
Mailing Address 1612 Gulick Ave		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>45.92</div> </div>	
City Honolulu State HI Zip Code 96819	Purpose of Disbursement CINGULAR		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) NEXTEL PARTNERS		<b>Transaction ID:</b> SB21B.55886 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 0 7</div> </div>	
Mailing Address PO BOX 4192		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>195.45</div> </div>	
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement TELEPHONE		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) STANLEY OKADA		<b>Transaction ID:</b> SB21B.55887 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 0 / 2 0 0 7</div> </div>	
Mailing Address 2519 A PAUOA RD		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>250.00</div> </div>	
City HONOLULU State HI Zip Code 96813	Purpose of Disbursement PHOTOGRAPHY: DINNER		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**491.37**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

## **A. PREMIUM FINANCING SPECIALISTS**

Mailing Address 22653 NETWORK PL

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement  
LIABILITY INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55864

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

798.09

Full Name (Last, First, Middle Initial)

## **B. SAM'S CLUB DISCOVER**

Mailing Address PO BOX 960016

City ORLANDO State FL Zip Code 32896

Purpose of Disbursement  
SAM'S CLUB

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55898

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

243.15

Full Name (Last, First, Middle Initial)

## **C. SHOW & TELL**

Mailing Address 866 IWILEI RD #204

City HONOLULU State HI Zip Code 96817

Purpose of Disbursement  
AUDIO/VISUAL: DINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55896

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

6587.46

**SUBTOTAL** of Disbursements This Page (optional) .....

7628.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. Lori Wingard

Mailing Address 5994 Kalaniana'ole Hwy

City  
Honolulu

State  
HI

Zip Code  
96821

Purpose of Disbursement  
SAFEWAY-FOOD FOR VOLUNTEERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.55866

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	7

Amount of Each Disbursement this Period

205.93

SUBTOTAL of Disbursements This Page (optional) .....

205.93

TOTAL This Period (last page this line number only) .....

95037.22

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 55 / 58  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

NAME OF ACCOUNT

State and Local Account - Bank of HI

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	7

TOTAL AMOUNT TRANSFERRED

5354.02

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

5354.02

Transaction ID: H3.55907

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

5354.02

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

5354.02

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 56 / 58  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A. Full Name (Last, First, Middle Initial)**

CENTRAL PACIFIC BANK

Mailing Address

PO BOX 135010

City	State	Zip Code
HONOLULU	HI	96801

001

Purpose of Disbursement:  
MORTGAGECategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8259.98

Date 02 / 01 / 2007

Transaction ID: H4.55900

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
549.12		1412.01		1961.13

**B. Full Name (Last, First, Middle Initial)**

THE IMPERIAL PLAZA

Mailing Address

711 KAPIOLANI BLVD, SUITE 700

City	State	Zip Code
Honolulu	HI	96813

Category/  
TypePurpose of Disbursement:  
MAINTENANCE/UTILITIESActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10185.77

Date 02 / 01 / 2007

Transaction ID: H4.55903

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
539.22		1386.57		1925.79

**C. Full Name (Last, First, Middle Initial)**

LANIER WORLDWIDE, INC.

Mailing Address

PO BOX 105533

City	State	Zip Code
ATLANTA	GA	30348

Category/  
TypePurpose of Disbursement:  
EQUIPMENT RENTALActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10937.13

Date 02 / 01 / 2007

Transaction ID: H4.55905

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.38		540.98		751.36

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1298.72		3339.56		4638.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

**A. Full Name (Last, First, Middle Initial)**  
 CITY & COUNTY OF HONOLULU

Mailing Address

REAL PROPERTY TAX COLLECTION DIVISION OF TREASURY

City	State	Zip Code
Honolulu	HI	96812

001

Purpose of Disbursement:  
 REAL PROPERTY TAX

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13054.02

Date 

M	M
0	2

 / 

D	D
0	8

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.55906

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

592.73

1524.16

2116.89

**B. Full Name (Last, First, Middle Initial)**  
 HAWAIIAN TELCOM

Mailing Address

PO BOX 30770

City	State	Zip Code
HONOLULU	HI	96820

001

Purpose of Disbursement:  
 TELEPHONE

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13625.38

Date 

M	M
0	2

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.55901

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

159.98

411.38

571.36

**C. Full Name (Last, First, Middle Initial)**  
 IMS, INC.

Mailing Address

46-001 KAMEHAMEHA HWY SUITE 201

City	State	Zip Code
KANEOHE	HI	96744

001

Purpose of Disbursement:  
 ACCOUNTING

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14672.50

Date 

M	M
0	2

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.55902

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

293.19

753.93

1047.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1045.90

2689.47

3735.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

2344.62

6029.03

8373.65

Form/Schedule: **F3XA**

Transaction ID:

The Hawaii Republican party has not engaged in any specific federal election activity during this reporting period. There were no expenditures or disbursements for public communications (as defined under 11 CFR section 100.26) that refer to a clearly identified candidate for Federal office and that promote, support, attack or oppose any Federal candidate.

Form/Schedule: **SA15**

Transaction ID: **SA15.55910**

Kathi donated some pictures to be auctioned off at the annual Lincoln Day Dinner Silent auction. The party paid to have them framed. Unfortunately they did not sell so Ms. Thomason reimbursed the party for the cost of framing her pictures.